UNITED STATES BANKRUPTCY CO		VOLUNTARY				
Southern DISTRICT OF TEXAS		PETITION				
IN RE (Name of debtor - If individual, enter Last, First, Middle) SHARON L. PIPEN	NAME OF JOINT DEBTOR (Spouse) (Last, First, Middle)					
ALL OTHER NAMES used by the debtor in the last 6 years (Include married, maiden, and trade names.)	ALL OTHER NAMES used by the joint debtor in the last 6 years (Include married, maiden, and trade names.)					
SOC. SEC. / TAX I.D. NO. (If more than one, state all.)	SOC. SEC. / TAX I.D. NO. (If more than one, state all.)					
STREET ADDRESS OF DEBTOR (No. and street, city, state, and zip code) 7/43 Roos 1-10-5-10-1, TEXA, 77074	STREET ADDRESS OF JOINT DEBTOR (No. and street, city, state, and zip code)					
COUNTY OF RESIDENCE OR PRINCIPAL PLACE OF BUSINESS			COUNTY OF RESIDENCE OR PRINCIPAL PLACE OF BUSINESS			
MAILING ADDRESS OF DEBTOR (If different from street address)	MAILING ADDRESS OF	JOINT DEBTOR	(If different from street address)			
LOCATION OF PRINCIPAL ASSETS OF BUSINESS DEBTOR (If different from addresses listed above)	VENUE (Check one box) Debtor has been domicilied or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days then harry other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.					
INFORMATION REGARDING DEE	^	cable boxes)				
TYPE OF DEBTOR Individual	WHICH THE PETITI Chapter 7 Ci Chapter 9 Ci FILING FEE (Check Filing fee attached Filing fee to be paid Must attach signed a	HAPTER OR SECTION OF BANKRUPTCY CODE UNDER WHICH THE PETITION IS FILED(Check one box) Chapter 7 Chapter 11 Chapter 13 Chapter 9 Chapter 12 Sec. 304 - Case Ancillary to Foreign Proceeding ILING FEE (Check one box)				
Farming	NAME AND ADDRESS OF LAW FIRM OR ATTORNEY Telephone No. NAME(S) OF ATTORNEY(S) DESIGNATED TO REPRESENT THE DEBTOR (Print or Type Names)					
	Debtor is not repr	esented by an atte	omey			
STATISTICAL ADMINISTRATIVE INFORMATION (28 U.S.C. § 604) (Estimates only) (Check applicable boxes) Debtor estimates that funds will be available for distribution to unsecured paid, there will be no funds available for distribution to unsecured credition of the control of the	d creditors.	HIS SPACE F	OR COURT USE ONLY			
	, 1					
1000-040 100			United States District Cou			
Under50 50-99 100-499 500-999 1000-999 10,000-99	,000 100,000-over		Southern District of Texa			
ESTIMATED LIABILITIES (In thousands of dollars)						
Under 50 50_99 100_499 500_699 1000_9999 10,000_99			JUN 0 2 2009			
ESTIMATED NO. OF EMPLOYEES - CHAPTER 11 & 12 ONLY			Michael N. Alley			
0 1-19 20-99 100-999 1000-999			Clerk of Court			
ESTIMATED NO. OF EQUITY SECURITY HOLDERS - CHAPTER 11 & 12 OF	VL I					

		Case No					
FILING OF PLAN							
For Chapter 9, 11, 12 and 13 cases only. Che							
A copy of debtor's proposed plan dated is attached. Debtor intends to file a plan within the time allowed statute, rule, or order of the court.							
PRIOR BANKRUPTCY CAS	SE FILED WITHIN LAST	6 YEARS (If more than one, attach additional sheet)					
Location Where Filed	Case Number	Date Filed					
PENDING BANKRUPTCY CASE FILED BY ANY	SPOUSE, PARTNER, OR A	AFFILIATE OF THIS DEBTOR (If more than one, attach additional s	heet)				
Name of Debtor	Case Number	Date					
		6/1/09					
Relationship	District	Judge	-				
	REQUEST F	FOR RELIEF					
Debtor requests relief in accordance with the	chapter of title 11, Un	nited States Code, specified in this petition.					
	SIGNA	TURES .					
x	ATTO	PRNEY					
Signature		Date					
INDIVIDUAL/JOINT DEB	TOR(S)	CORPORATE OR PARTNERSHIP DEBTOR					
I declare under penalty of perjury that the	e information provided	I declare under penalty of perjury that the information					
in this petition is true and correct.		provided in this petition is true and correct, and that the filing of					
	2	the petition on behalf of the debtor has been authorized.					
X Marin V. 11	pu-	. X					
Signature of Liebtor 6-2-09 838-668	3-0923	Signature of Authorized Individual					
Date		Print or Type Name of Authorized Individual					
		,,					
<u>X</u>		Title of Individual Authorized by Debtor to File this Petition					
Signature of Joint Debior		The of more day below to Fig. this remon					
Date		Date					
EXHIBIT "A" (To be completed if debtor is a corporation requesting relief under chapter 11.) Exhibit "A" is attached and made a part of this petition.							
		H PRIMARILY CONSUMER DEBTS (SEE P.L. 98-353 § 322)					
,		·	•				
I am aware that I may proceed under cha under each such chapter, and choose to pro		of title 11, United States Code, understand the relief available of such title.	•				
If I am represented by an attorney, exhib	it "B" has been complet	ted.					
х							
Signature of Debtor		Date					
,							
X Signature of Joint Debtor		Date					
EXHIBIT "R" (To be compl	eted by attorney for individu	ual chapter 7 debtor(s) with primarily consumer debts.)					
EXHIBIT "B" (To be completed by attorney for individual chapter 7 debtor(s) with primarily consumer debts.)							
I, the attorney for the debtor(s) named in the foregoing petition, declare that I have informed the debtor(s) that (he, she, or they) may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter.							
x	· · · · · · · · · · · · · · · · · · ·						
Signature of Attorney		Date					

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Name of Debtor____

Form B6D-Cont. (6/90)

Inre Sharon Piper	Case No
Debtor *	(If known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS (Continuation Sheet)

CREDITOR'S NAME AND Mailing Address Including ZIP Code	CODEBTOR	HUSBAND, WIFE, JOINT OR . COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND MARKET VALUE OF PROPERTY SUBJECT TO LIEN	6	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO.			Home mortgage					
			<i>y</i> , <i>y</i> .	! 1				
TEXAS ONE Credit Union 2100 Wastloop South #1075 Houston, Temo 77027								
Houston, TEm 77027			VALUE \$				19,000.00	_
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ACCOUNT NO.								
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		لــــا	···	Sut	total	<u> </u>		
Sheet no of continuation sheets attach	ed to	n Sch	edule of Creditors (Total	d of th		- 1	\$ 19,000.00	

Sheet no.___of___continuation sheets attached to Schedule of Creditors Holding Secured Claims

Subtotal -> (Total of this page)

Total -> Use only on last page)

(Report total sise on Summary of Schedules)